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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

On December 16, 2005

TOWNSEND and TOWNSEND and CREW LLP

By: Patricia Andrews

PATENT

Attorney Docket No.: 022101-001400US

Client Ref. No.: 18945

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Schnell, U. et al.

Application No.: 10/070,343

Filed: August 14, 2002

For: SYSTEM FOR
THERMOCYCLING OF FLUIDS IN
CARTERIDGES

Customer No.: 41504

Confirmation No. 7095

Examiner: BEISNER, WILLIAM H

Technology Center/Art Unit: 1744

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed, September 27, 2005, please enter the following amendments and remarks:

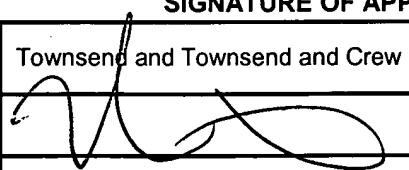
Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

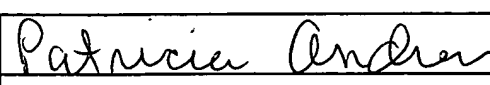
Remarks/Arguments begin on page 6 of this paper.

TFW 1744

TRANSMITTAL FORM DEC 20 2005 (to be used for all correspondence after initial filing) PATENT & TRADEMARK OFFICE	Application Number	10/070,343
	Filing Date	August 14, 2002
	First Named Inventor	Urban Schnell
	Art Unit	1744
	Examiner Name	BEISNER, WILLIAM H
	Attorney Docket Number	022101-001400US
Total Number of Pages in This Submission		

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Matthew E. Hinsch		
Date	December 16, 2005	Reg. No.	47,651

CERTIFICATE OF TRANSMISSION/MAILING			
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Signature			
Typed or printed name	Patricia Andrews	Date	December 16, 2005